

MEDIATOR'S STATUS REPORT

Please do not use parties' names, mention abuse or violate confidentiality in any other way.

YOUR NAME _____

DATE MEDIATION COMPLETED _____

CASE # _____ COUNTY WHERE CASE FILED _____

1. COURT ORDERED MEDIATION? _____ YES _____ NO

2. NUMBER OF SESSIONS? _____
TOTAL NUMBER OF HOURS MEDIATING _____

3. DID THE PARTIES REACH AGREEMENT ON:

_____ ALL ISSUES
_____ SOME ISSUES
_____ NO ISSUES

4. THE ISSUES MEDIATED WERE (CHECK ALL THAT APPLY):

_____ FOR A TEMPORARY ORDER OR ORDERS
_____ FOR A FINAL ORDER OR DECREE
_____ FOR A MODIFICATION ORDER
_____ PARENTING SCHEDULE: CUSTODY OR VISITATION
_____ ALIMONY/SPOUSAL SUPPORT ISSUES
_____ FINANCIAL ISSUES
_____ OTHER ISSUES (PLEASE DESCRIBE)

5. WERE ATTORNEYS PRESENT AT ANY SESSION? _____ YES _____ NO

6. DID YOU SCREEN FOR DOMESTIC VIOLENCE? _____ YES _____ NO

Please send to: 8th District Court Administration
333 North Court St, Ottumwa, Iowa 52501
FAX: 641-682-1315 Mark.Hagist@iowacourts.gov